

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-G		5/8
O.I.P.E. CLASSIFIER		48	5/22/01
FORMALITY REVIEW	SL	STJ	6/28/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	2/9/01
2	2/9/01
3	2/9/01
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Claim	Date
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C.C.  
06-28-01

If more than 150 claims or 10 actions  
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